

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Stephen K. Simpson, Inc.

ADDRESS (number and street) ▼

P O Box 1960



Check if different than previously reported. (ACC)

Milledgeville

GA

31059

2. FEC IDENTIFICATION NUMBER ▼

C

C00504175

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

GA

10

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2013

2013

through

M M / D D / Y Y Y Y

03 / 31 / 2013

2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joel A. Graham

Signature of Treasurer Joel A. Graham

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 06 / 2014

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 24

Write or Type Committee Name

Friends of Stephen K. Simpson, Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	51006.10	51006.10
(b) Total Contribution Refunds (from Line 20(d))	5365.00	5365.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	45641.10	45641.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1375.12	1760.12
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1755.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1375.12	4.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	45191.87	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	27720.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 24

Write or Type Committee Name

Friends of Stephen K. Simpson, Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	3

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

45651.00

45651.00

(ii) Unitemized.....

355.10

355.10

(iii) TOTAL of contributions from individuals ▶

46006.10

46006.10

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

5000.00

5000.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

51006.10

51006.10

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

1755.63

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

51006.10

52761.73

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 24

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1375.12	1760.12
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	5365.00	5365.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5365.00	5365.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6740.12	7125.12

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	925.89
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	51006.10
25. SUBTOTAL (add Line 23 and Line 24).....	51931.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6740.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	45191.87

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

A. Hon. Charles Abell

Mailing Address 5353 Brandon Ridge Way

City

Fairfax

State

VA

Zip Code

22032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wounded Warrior Project

Occupation

EVP

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

Transaction ID : SA11AI.5202

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Michelle Abell

Mailing Address 5353 Brandon Ridge Way

City

Fairfax

State

VA

Zip Code

22032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2013

Transaction ID : SA11AI.4839

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Danny Brown

Mailing Address P.O. Box 190

City

Davisboro

State

GA

Zip Code

31018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Agrostar

Occupation

Principal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2013

Transaction ID : SA11AI.4854

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

A. Malcolm S Burgess Jr.

Mailing Address P O Box 4146

City

Macon

State

GA

Zip Code

31208-4146

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burgess Pigment Co.Occupation
President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2013

Transaction ID : SA11AI.4840

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Barry K Cayson

Mailing Address 33438 Alder Cr

City

Spanish Fort

State

AL

Zip Code

36527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regions BankOccupation
Banker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

501.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2013

Transaction ID : SA11AI.4877

Amount of Each Receipt this Period

501.00

Full Name (Last, First, Middle Initial)

C. Michael Faulk

Mailing Address 303 S Jefferson Ave

City

Eatonton

State

GA

Zip Code

31024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shoppers PharmacyOccupation
Pharmacist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2013

Transaction ID : SA11AI.4831

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4101.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

A. Roy H Fickling

Mailing Address P O Box 310

City

Macon

State

GA

Zip Code

31202

FEC ID number of contributing federal political committee.

C

Name of Employer
Fickling & CompanyOccupation
Principal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2013

Transaction ID : SA11AI.4846

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Nancy Frizzell

Mailing Address 1627 Storington Avenue

City

Brandon

State

FL

Zip Code

33511-1837

FEC ID number of contributing federal political committee.

C

Name of Employer
JSA HealthcareOccupation
Registered Nurse

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2013

Transaction ID : SA11AI.4832

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Russell Frizzell

Mailing Address 1627 Storington Avenue

City

Brandon

State

FL

Zip Code

33511-1837

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2013

Transaction ID : SA11AI.4833

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

Eric Griffin

A.

Mailing Address 1265 N. Peachtree Parkway

City

Peachtree City

State

GA

Zip Code

30269-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer

W.E. Griffin Co.

Occupation

Principal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2013

Transaction ID : SA11AI.4875

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Carl Hofstadter

B.

Mailing Address 443 Old Club Rd., South

City

Macon

State

GA

Zip Code

31210-4726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hofstadter & Associates

Occupation

Principal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2013

Transaction ID : SA11AI.4878

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C Candler Hunt

C.

Mailing Address P O Box 488

City

Madison

State

GA

Zip Code

30650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Godfrey's Warehouse

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2013

Transaction ID : SA11AI.4874

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

James R Ivey Jr.

Mailing Address 138 Ivey Weaver Rd.

City

Milledgeville

State

GA

Zip Code

31061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Century Bank & TrustOccupation
Banker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2013

Transaction ID : SA11AI.4853

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

James T Kjer

Mailing Address 1391 Planters Trail

City

Greensboro

State

GA

Zip Code

30642

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2013

Transaction ID : SA11AI.4873

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Henry Koplin

Mailing Address 1158 Jackson Springs Road

City

Macon

State

GA

Zip Code

31211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schnitzer SoutheastOccupation
Officer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2013

Transaction ID : SA11AI.4848

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

A. Merritt Massey

Mailing Address 3006 Heritage Road NE Ste D

City

Milledgeville

State

GA

Zip Code

31061

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Insurance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2013

Transaction ID : SA11AI.4850

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. William P Overman Jr.

Mailing Address P O Box 854

City

Hardwick

State

GA

Zip Code

31034

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired WWII Vet

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2013

Transaction ID : SA11AI.4843

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Annette Payne

Mailing Address 3691 Davis Academy Rd.

City

Rutledge

State

GA

Zip Code

30633

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2013

Transaction ID : SA11AI.4838

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

Hon. Sonny Perdue

Mailing Address 803 Highway 247 South

City

Kathleen

State

GA

Zip Code

31047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Agribusiness

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
02 20 2013

Transaction ID : SA11AI.4835

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Susan A Robertson

Mailing Address 3022 Centerville Rd.

City

Lexington

State

GA

Zip Code

30648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 25 2013

Transaction ID : SA11AI.4867

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Daniel Simpson

Mailing Address 131 Maple Trace

City

Birmingham

State

AL

Zip Code

35244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Delta Air Lines

Occupation
Captain

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
03 26 2013

Transaction ID : SA11AI.4872

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

A. John Simpson

Mailing Address 6424 Gehrig Cr

City

Burleson

State

TX

Zip Code

76028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Simpson Consulting, LLC

Occupation

Member

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2013

Transaction ID : SA11AI.4841

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

B. Ronald E Simpson

Mailing Address 1468 LeGrand Cr.

City

Lawrenceville

State

GA

Zip Code

30043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

Transaction ID : SA11AI.4868

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Sarah Simpson

Mailing Address 101 Stevens Drive

City

Milledgeville

State

GA

Zip Code

31061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2013

Transaction ID : SA11AI.4836

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7800.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

John Stevens

A.

Mailing Address 2040 Double Bridges Rd.

City

Good Hope

State

GA

Zip Code

30641

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
03 21 2013

Transaction ID : SA11AI.4851

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Joyce Stevens

B.

Mailing Address P O Box 69

City

Good Hope

State

GA

Zip Code

30641

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Stevens Group

Occupation

Principal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
03 21 2013

Transaction ID : SA11AI.4852

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Fred Van Horn

C.

Mailing Address 1632 Pine Valley Rd.

City

Milledgeville

State

GA

Zip Code

31061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ga. Military College

Occupation

EVP

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 15 2013

Transaction ID : SA11AI.4849

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

Ken Wheat

A.

Mailing Address 4327 Ivy Hall Drive

City

Columbia

State

SC

Zip Code

29206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Boyd Management

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2013

Transaction ID : SA11AI.4847

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Sibley F Wheeler

B.

Mailing Address 213 Lee St

City

Thomson

State

GA

Zip Code

30824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2013

Transaction ID : SA11AI.4844

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

William Wheeler Esq.

C.

Mailing Address 106 E Hall St

City

Thomson

State

GA

Zip Code

30824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2013

Transaction ID : SA11AI.4845

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

3100.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

Rev. Rex Wilson

Mailing Address 4100 Sandwood Dr.

City

Columbia

State

SC

Zip Code

29206

FEC ID number of contributing
federal political committee.

C

Name of Employer
SC Conf UMC Credit UnionOccupation
CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2013

Transaction ID : SA11Al.4876

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

45651.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

Mr. Stephen K Simpson

Mailing Address P O Box 1960

City

Milledgeville

State

GA

Zip Code

31059

FEC ID number of contributing
federal political committee.

C H2GA10117

Name of Employer

Self Employer

Occupation

Contractor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

02 / **28** / **2013**

Transaction ID : SA11D.4897

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

5000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 24

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address P O Box 30285

City	State	Zip Code
Salt Lake City	UT	84130

Purpose of Disbursement
Gas/Vols meal

002

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: GA

District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	12	/	2013

Amount of Each Disbursement this Period

245.28

Transaction ID : SB17.4881

B. Capital One

Mailing Address P O Box 30285

City	State	Zip Code
Salt Lake City	UT	84130

Purpose of Disbursement
Gas/Vols meal

002

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: GA

District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	25	/	2013

Amount of Each Disbursement this Period

40.06

Transaction ID : SB17.4882

c. Capital One

Mailing Address P O Box 30285

City	State	Zip Code
Salt Lake City	UT	84130

Purpose of Disbursement
Gas/Vols meal

002

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: GA

District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	06	/	2013

Amount of Each Disbursement this Period

48.55

Transaction ID : SB17.4887

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

245.28

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 24

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address P O Box 30285

City	State	Zip Code
Salt Lake City	UT	84130

Purpose of Disbursement
Gas/Vols meal

002

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: GA District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2013

Amount of Each Disbursement this Period

65.43

Transaction ID : SB17.4888

B. Capital One

Mailing Address P O Box 30285

City	State	Zip Code
Salt Lake City	UT	84130

Purpose of Disbursement
Gas/Vols meals

002

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: GA District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2013

Amount of Each Disbursement this Period

159.68

Transaction ID : SB17.4890

c. The Brainstorm Lab

Mailing Address 4149 Arkwright Rd., Ste A

City	State	Zip Code
Macon	GA	31210

Purpose of Disbursement
Web Svcs

001

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: GA District: 10

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2013

Amount of Each Disbursement this Period

324.00

Transaction ID : SB17.4880

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

549.11

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 24

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Stephen K. Simpson, Inc.

Full Name (Last, First, Middle Initial)

A. Daniel Simpson

Mailing Address 131 Maple Trace

Date of Disbursement

M M	D D	Y Y Y Y
03	21	2013

City	State	Zip Code
Birmingham	AL	35244

Purpose of Disbursement

010

Amount of Each Disbursement this Period

5365.00

Transaction ID : SB20A.4891

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: GA District: 10

Full Name (Last, First, Middle Initial)

B. John Simpson

Mailing Address 6424 Gehrig Cr

Date of Disbursement

M M	D D	Y Y Y Y
03	04	2013

City	State	Zip Code
Burleson	TX	76028

Purpose of Disbursement

010

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB20A.4885

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: GA District: 10

Full Name (Last, First, Middle Initial)

c. Sandye Simpson

Mailing Address 6424 Gehrig Cr

Date of Disbursement

M M	D D	Y Y Y Y
03	04	2013

City	State	Zip Code
Burleson	TX	76028

Purpose of Disbursement

010

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB20A.4886

Candidate Name

Friends of Stephen K. Simpson, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: GA District: 10

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5365.00

5365.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 21 OF 24

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4156

Friends of Stephen K. Simpson, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

Mr. Stephen K Simpson

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P O Box 1960

City

State

ZIP Code

Milledgeville

GA

31059

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 / 14 / 2011

Date Due

M M / D D / Y Y Y Y
11/30/2012

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 22 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4481

Friends of Stephen K. Simpson, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Mr. Stephen K Simpson

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
P O Box 1960

City

State

ZIP Code

Milledgeville

GA

31059

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

2500.00

0.00

2500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y
04 / 05 / 2012M M / D D / Y Y
11/30/2012Y Y Y Y
11/30/2012

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 23 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4482

Friends of Stephen K. Simpson, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

Mr. Stephen K Simpson

[PERSONAL FUNDS]

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P O Box 1960

City

State

ZIP Code

Milledgeville

GA

31059

Original Amount of Loan

5220.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5220.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 22 / 2012

Date Due

M M / D D / Y Y Y Y
11/30/2012

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5220.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 24 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4731

Friends of Stephen K. Simpson, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mr. Stephen K Simpson

Mailing Address
P O Box 1960City State ZIP Code
Milledgeville GA 31059

Original Amount of Loan

25000.00

Cumulative Payment To Date

15000.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 17 / 2012

Date Due

M M / D D / Y Y Y Y
/ / 12/31/12

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

TOTALS This Period (last page in this line only)..... ►

27720.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.